



#13
Docket No. 17171 CIP4DIV (AP)
Application No. 09/685,828
Notice of Allowance dated 3/22/04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of
Klein, et al.

Application No: 09/685,828

Filed: October 10, 2000

For: METHODS OF IDENTIFYING
COMPOUNDS HAVING NUCLEAR
RECEPTOR HORMONE AND/OR
ANTAGONIST ACTIVIES

Group Art Unit: 1648

Examiner: Myron G. Hill

Confirmation No. 4591

Notice of Allowance dated
March 22, 2004

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TRANSMITTAL LETTER ACCOMPANYING DECLARATION

Mail Stop: ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

As required in the Notice of Allowance, Applicants submit herein a substitute Combined Declaration & Power of Attorney – U.S.A. Application.

PETITION UNDER 37 C.F.R. 147 (a)

The following inventors could not be reached after diligent effort. Their last known addresses are listed with their names.

Elliot S. Klein, 20 Winton Farm Road, Connecticut, CA 06470

Alan T. Johnson, 17058 Iron Mountain Drive, Poway, CA 92064-6316

Andrew M. Standeven, 427 ½ Orchid Avenue, Corona del Mar, CA 92625

Remaining applicants hereby petition the Director that the requirement that these inventors sign the declaration be suspended or waived in accordance with 37 C.F.R 1.183. The following is submitted as evidence that diligent effort was made to reach the inventors.

1. Copies of the letters sent to inventors requesting that they sign the declaration (3 pgs).
2. Copies of Certified Mail receipts corresponding to the above letters (3 pgs).

The Commissioner is hereby authorized to charge the \$130 fee according to 37 CFR 1.17(h) as well as any fees that may be incurred as a result of this communication, or credit any overpayment to Deposit Account No. 01-0885. A duplicate copy of this sheet is enclosed for that purpose.

Respectfully submitted,



Dated: June 17, 2004

Please address all correspondence to:
Brent A. Johnson (T2-7H)
Allergan, Inc.
2525 Dupont Drive
Irvine, CA 92612

Brent A. Johnson
Registration No. 51,851
Agent of Record
Telephone: 714.246.4348
Facsimile No. 714.246.4249



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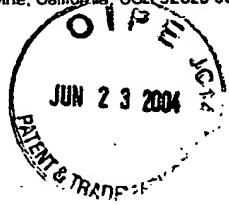
Mr. Alan T. Johnson
17058 Iron Mountain Drive
Poway, CA 92064-6316

See Reverse for Instructions

PS Form 3800, June 2002

ALLERGAN

2525 Dupont Drive, P.O. Box 19534, Irvine, California-USA 92623-9534 Telephone: (714) 246-4500 Website: www.allergan.com
Brent A. Johnson, Ph.D.
Patent Agent
Phone: (714) 246-4348
Fax: (714) 246-4249
Email: johnson_brent@allergan.com



May 28, 2004

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Mr. Alan T. Johnson
17058 Iron Mountain Drive
Poway, CA 92064-6316

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RE: U. S. Patent Application Serial Number 09/685,828
Filed: October 10, 2000
*Methods of Identifying Compounds Having Nuclear Receptor Negative
Hormone and/or Antagonist Activities*
Our Ref.: 17171 CIP4 DIV1 (HL)

Dear Mr. Johnson:

Please find enclosed a copy of the allowed claims in the above-referenced patent application filed with the U.S. Patent Office. Included in this package is a Combined Declaration & Power of Attorney for your signature.

As a co-inventor, please be so kind as to execute the Declaration & Power of Attorney and return it to me in the enclosed self-addressed, postage paid Federal Express envelope before June 20, 2004.

Thank you for your assistance in this matter and if you have any questions, please do not hesitate to contact me at the above number.

Sincerely,

ALLERGAN, INC.

Brent A. Johnson, Ph.D.
Patent Agent

BAJ/sb
Encl.

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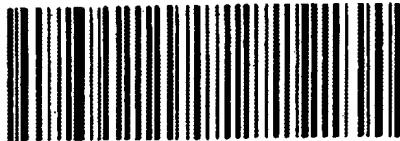
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Street or PO City, CA	Poway, CA 92064-6316
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2002 2410 0005 3400 3182



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Poway, CA 92064-6316

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B. Date of Delivery		
C. Signature		
<input checked="" type="checkbox"/> X		
<input type="checkbox"/> Agent <input type="checkbox"/> Addressee		
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If YES, enter delivery address below:		
<hr/> <hr/> <hr/>		
1. Service Type		
<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail		
<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise		
<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
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From: Return Address Account Number

To: Return Address Account Number

Mr. Alan T. Johnson

Mr.

17058 Iron Mountain Dr.

Mr.

Pokey,

Mr.

2100100040

Mr.

S. Bartholomew

Mr.

18693 TELLER AVE

Mr.

2525 Dupont Drive, P.O. Box 19534, Irvine, California, USA 92623-9534 Telephone: (714) 246-4500 Website: www.allergan.com
Brent A. Johnson, Ph.D.
Patent Agent
Phone: (714) 246-4348
Fax: (714) 246-4249
Email: johnson_brent@allergan.com



June 14, 2004

Certified Mail/ Return Receipt Requested

Mr. Andrew M. Standeven
427 1/2 Orchid Avenue
Corona del Mar, CA 92625

RE: U. S. Patent Application Serial Number 09/685,828

Filed: October 10, 2000

*Methods of Identifying Compounds Having Nuclear Receptor Negative
Hormone and/or Antagonist Activities*

Our Ref.: 17171 CIP4 DIV1 (HL)

Dear Mr. Standeven:

Please find enclosed a copy of the allowed claims in the above-referenced patent application filed with the U.S. Patent Office. Included in this package is a Combined Declaration & Power of Attorney for your signature.

As a co-inventor, please be so kind as to execute the Declaration & Power of Attorney and return it to me in the enclosed self-addressed, postage paid Federal Express envelope before June 20, 2004.

Thank you for your assistance in this matter and if you have any questions, please do not hesitate to contact me at the above number.

Sincerely,

ALLERGAN, INC.

A handwritten signature in black ink, appearing to read "Brent A. Johnson".

Brent A. Johnson, Ph.D.
Patent Agent

BAJ/sb
Encl.



SENDER: COMPLETE THIS SECTION ON DELIVERY		RECIPIENT: COMPLETE THIS SECTION	
<p>A. Received by <input type="checkbox"/> Please Print Cleanly</p> <p>B. Date of Delivery</p>		<p>A. Complete Items 1, 2, and 3 Also complete Prin 4 If Restricted Delivery is desired. so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.</p>	
<p>C. Signature</p> <p><input type="checkbox"/> Agent</p> <p><input type="checkbox"/> Address</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>1. Article Addressed to:</p> <p>Mr. Andrew M. Standardven 427 1/2 Orchid Avenue Coralia del Mar, CA 92625</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> C.O.D.</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Return Receipt for Merchandise</p>		<p>4. Restricted Delivery / Extra Fee <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Copy) from service label</p> <p>7002 2410 0005 3400 3166</p>			
<p>1. Domestic Return Receipt 102595-00-00-099 PS Form 3811, July 1999</p>			



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0110 2412
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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11



Sent To
Mr. Andrew M. Standeven
AMGEN
1840 Dehavilland Dr.
Thousand Oaks, CA 92064-6316

PS Form 3800, June 2002

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SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

Andrew M. Standeven
EN
Dehavilland Dr.
Thousand Oaks, CA 92064-6316

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A. Received by (Please Print Clearly) **Chris Schleifer** B. Date of Delivery **6/29/04**

C. Signature **X** *Chris Schleifer*

Agent
 Addressee

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: **X** No

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label) **11411241011005440013212**

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ALLERGAN

2525 Dupont Drive, P.O. Box 19534, Irvine, California, USA 92623-9534 Telephone: (714) 246-4500 Website: www.allergan.com
Brent A. Johnson, Ph.D.
Patent Agent
Phone: (714) 246-4348
Fax: (714) 246-4249
Email: johnson_brent@allergan.com



May 28, 2004

Certified Mail/ Return Receipt Requested

Mr. Andrew M. Standeven
AMGEN
1840 Dehavilland Dr.
Thousand Oaks, CA 92064-6316

RE: U. S. Patent Application Serial Number 09/685,828
Filed: October 10, 2000
*Methods of Identifying Compounds Having Nuclear Receptor Negative
Hormone and/or Antagonist Activities*
Our Ref.: 17171 CIP4 DIV1 (HL)

Dear Mr. Standeven:

Please find enclosed a copy of the allowed claims in the above-referenced patent application filed with the U.S. Patent Office. Included in this package is a Combined Declaration & Power of Attorney for your signature.

As a co-inventor, please be so kind as to execute the Declaration & Power of Attorney and return it to me in the enclosed self-addressed, postage paid Federal Express envelope before June 20, 2004.

Thank you for your assistance in this matter and if you have any questions, please do not hesitate to contact me at the above number.

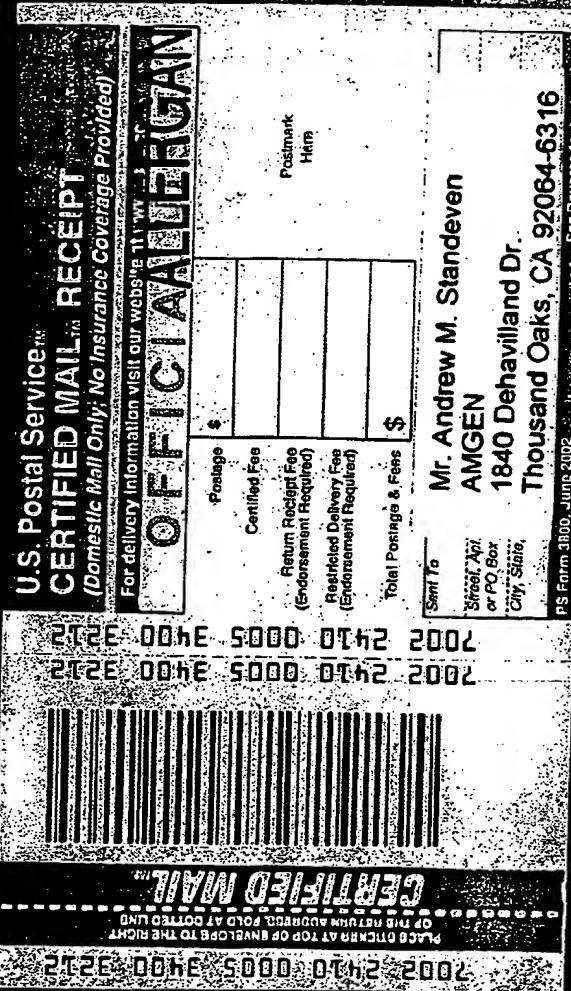
Sincerely,

ALLERGAN, INC.

A handwritten signature in black ink that reads "Brent A. Johnson".

Brent A. Johnson, Ph.D.
Patent Agent

BAJ/sb
Encl.



COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete
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 so that we can return the card to you.
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A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature X Agent Addresssee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail Return Receipt for Merchandise
 Registered C.O.D.
 Insured Mail

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label) **7002 2110 0005 3400 3212**

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PS Form 381, July 1999



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Express

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Mr. Elliott S. Klein

Phone:

20 Winton Park Rd

Neckown

St. CT # 06470

To:

Mr. S. Bartholomew

Phone (714) 246-9753

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Phone:

c/o Amstar

1840 Behaviland Dr.

Thousand Oaks

St. CA # 92064-5316

To:

Mr. S. Bartholomew

Phone (714) 246-9753

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20 Winton Farm Rd.
Newtown, CT 06470

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Mr. Elliott S. Klein
 20 Winton Farm Rd.
 Newtown, CT 06470

Received

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LEGALPATENTS

2. Article Number (Copy from service label)

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A. Received by (Please Print Clearly) B. Date of Delivery

Elliott Klein

6/12/04

C. Signature

X Elliott S. Klein

Agent

Addressee

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7002 24161 00051340013199
 2002 0005 3400 3199

ALLERGAN

2525 Dupont Drive, P.O. Box 19534, Irvine, California, USA 92623-9534 Telephone: (714) 248-4500 Website: www.allergan.com
Brent A. Johnson, Ph.D.
Patent Agent
Phone: (714) 248-4348
Fax: (714) 248-4249
Email: johnson_brent@allergan.com

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May 28, 2004

Certified Mail/ Return Receipt Requested

Mr. Elliott S. Klein
20 Winton Farm Rd.
Newtown, CT 06470

RE: U. S. Patent Application Serial Number 09/685,828
Filed: October 10, 2000
*Methods of Identifying Compounds Having Nuclear Receptor Negative
Hormone and/or Antagonist Activities*
Our Ref.: 17171 CIP4 DIV1 (HL)

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Sincerely,

ALLERGAN, INC.

Brent A. Johnson, Ph.D.
Patent Agent

BAJ/sb
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Mr. Elliott S. Klein
20 Winton Farm Rd.
Newtown, CT 06470
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Mr. Elliott S. Klein
20 Winton Farm Rd.
Newtown, CT 06470

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A. Received by (Please Print Clearly)	B. Date of Delivery
X	
C. Signature	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee

D. Is delivery address different from item 1? Yes No

3. Service Type
<input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
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